BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

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			_		_

CLAIMS AS FILED - PART I						S	SMALL ENTITY		OTHER THA		THAN	
(Column 1)			1)	(Colu	mn 2)		TYPE		OR	SMALL ENTITY		
TOTAL CLAIMS						ſ	RATE	FEE		RATE	FEE	
FO	R		NUMBER F	ILED	NUMBI	ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			min	us 20=				X\$ 9=		OR	X\$18=	
IND	EPENDENT CL	AIMS	mir	nus 3 =	*			X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero,			ro, ente	r "0" in c	olumn 2	ı	TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 2)										.	OTHER	
		(Column 1)		(Colu		(Column 3)	١.	SMALL E		OR	SMALL	
AMENDMENT	7	CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	. 27	Minus	** /	2/	= 6		X\$ 9=		OR	X\$18=	108
AME	Independent	TATION OF MI	Minus	***	TCLAIM	<u> 3</u>		X40=		OR	X80=	258
	- FINOT FINESEI	VIATION OF IM	JETH EL DET	LINDLIN	OLANI		1	+135=		OR	+270=	
							•	TOTAL		OR	TOTAL ADDIT. FEE	
W		(Calumn 1)		(Calu	mn 2\	(Column 2)		ADDIT. FEE			ADDIT. FEE	
In the		(Column 1) CLAIMS			mn 2) HEST	(Column 3)	ή г	—	ADDI	1		ADD
AMENDMENTER		REMAINING AFTER AMENDMENT		PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=	11	X\$ 9=		OR	X\$18=	
AME	Independent	* NTATION OF M	Minus	***	T CL AINA	=	- 1	X40=	1	OR	X80=	
L	FINOT PHESE	NIATION OF M		LINDLIN	CLAIM		ן ע	+135=		OR	+270=	
								TOTAL		OR	TOTAL	
U	·				- 2			ADDIT. FEE			ADDIT. FEE	
1		(Column 1) CLAIMS			mn 2) HEST	(Column 3	<u> </u>					
AMENDMENT BE		REMAINING AFTER AMENDMENT	32	NUM PREV	MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	•	Minus	**	•	=		X\$ 9=		OR	X\$18=	4
AME	Independent	*	Minus	***	IT CLAIM	=	41	X40=		OR	X80=	
-	LINOI PHESE	NTATION OF M	ULTIPLE UE	ENDER	II CLAIN	<u>'</u>	الم	+135=	,	OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT FEE										TOTAL		
	If the "Highest Nu "If the "Highest Nu	mber Previously P mber Previously P	aid For" IN THI	S SPACE IS SPACE	is less that is less th	an 20, enter "26 an 3, enter "3."	0."	ADDIT. FEE		OR	ADDIT. FEE	<u></u>
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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17,005 178

		CLAIMS AS	Column		(Colun	nn 2)	_	MALL EN	_	OR	OTHER SMALL	
TOTAL CLAIMS		19				I	RATE	FEE		RATE	FEE	
FOR		NUMBER FILED		NUMBE	R EXTRA		BASIC FEE	370.00	OR	BASIC FEE	740.00	
то	TAL CHARGEA	BLE CLAIMS	/G mini	us 20=	*			X\$ 9=		OR	X\$18=	
IND	EPENDENT CL	AIMS	/ mir	nus 3 =	*			X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter				r "0" in co	olumn 2	ı	TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART (Column 1) (Column						(Column 3)		SMALL E	NTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI PAID	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N N	Total	- 21	Minus	** 8	59	=		X\$ 9=		OR	X\$18=	18
AME	Independent	* 6-	Minus	***	3	- 3		X42=		OR	X84=	148
	FIRST PRESE	NIAITON OF M	ULTIPLE DEP	ENDEN	I CLAIM		1	+140=		OR	+280=	
							L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)	2		mn 2)	(Column 3)		-DDII.1 CE			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NOW	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	T OL ALBA	=	4	X42=		OR	X84=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEF	ENDEN	CLAIM		4	+140=		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			ımn 2)	(Column 3		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER YOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N N N	Total	- 18	Minus	** 6	20	=		X\$ 9=		OR	X\$18=	
AME	Independent	· 8	Minus	***	5	= 3	4	X42=		OR	X84=	250
ال	I FIRST PRESE	NTATION OF N	IOLI IPLE DE	KENDEL	VI CLAIM		L	+140=		OR		
:	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."							TOTAL		OR	TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												